Edgar Filing: Smith Douglas Edward - Form 4

Smith Doug Form 4											
June 04, 201									OMB AF	PROVAL	
FORM	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Filed pursuant to S Section 17(a) of the I 30(h)			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Sectio of the Investment Company Act of 1940					January 31, Expires: 2005 Estimated average burden hours per response 0.5			
1(b). (Print or Type	Responses)										
Smith Douglas Edward Symbol			Symbol	er Name and Ticker or Trading NDEMNITY CO [ERIE]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
100 ERIE INSURANCE PLACE (Month/E 06/01/2 (Street) 4. If Ame				te of Earliest Transaction hth/Day/Year) 11/2018				Director 10% Owner X Officer (give title Other (specify below) EVP			
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
ERIE, PA 1	.6530							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any	ned	3. Transactio Code	4. Securit n(A) or Di (Instr. 3,	ties Ao spose	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Class A Common Stock	06/01/2018			J <u>(1)</u>	2.575	А	\$ 113.01	5,076.021	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title c Derivativ Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Smith Douglas Edward 100 ERIE INSURANCE PLACE ERIE, PA 16530			EVP			
Signatures						
Rebecca A. Buona, Power of Attorney	(06/04/2018				

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Participant directed transaction under 401(k) Plan

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.